



# BLOOMFIELD TOWNSHIP FINANCIAL ASSISTANCE PROGRAMS

Presented by Brian Kepes, Bloomfield Township Treasurer

&

Darrin Kraatz, Director of Assessing

June 8, 2020

## AGENDA

- Programs available for Township Residents.
- Present enhancements to the Township's Financial Assistance Programs.
- Explain how the programs work.

## PROGRAMS AVAILABLE

- Property Tax Hardship/Poverty **Exemption**
  - Grants temporary property tax relief for eligible homeowners.
- **Waiver** of Solid Waste (Refuse) Application
  - **Waives** municipal solid waste collection fees due to financial hardship.
- Minor Home Repair Community Development Block **Grants**
  - Allows for household repairs up to \$5,000 annually for maximum of three years for residents over 60 years of age and who meet federal income guidelines.
- Property Tax Summer **Deferral** (State of Michigan)
- Affidavit for Disabled Veterans **Exemption** (State of Michigan)

# WHAT'S NEW?

- New Application Process and Form
- Added Waiver of Solid Waste and Minor Home Repair Community Development Block Grant to application
- The Assessors Office will be the department that will handle and process all financial assistance applications.



## BLOOMFIELD TOWNSHIP FINANCIAL ASSISTANCE APPLICATION

Please check all of the following that apply:

- \_\_\_\_\_ Property Tax Hardship/Poverty Exemption
- \_\_\_\_\_ Waiver of Solid Waste (Refuse) Application
- \_\_\_\_\_ Minor Home Repair Community Development Block Grants (Guidelines may differ so please pay attention to the specific guidelines for the CDB Grants.)

I, \_\_\_\_\_, Petitioner, being the owner and residing at the property that is listed below as my principal residence, apply for property tax relief under MCL 211.7u of the General Property Tax Act, Public Act 206 of 1893. The principal residence of persons who, in the judgment of the township supervisor or city assessor and board of review, by reason of poverty are unable to contribute toward the public charges is eligible for exemption in whole or in part from taxation per MCL 211.7u(1).

In order to be considered complete, this application must: 1) be completed in its entirety, 2) include information regarding all members residing within the household, and 3) include all required documentation as listed within the application. Please write legibly and attach additional pages as necessary.

**PERSONAL INFORMATION: Petitioner must list all required personal information.**

Property Address of Principal Residence:	Daytime Phone Number:	
Age of Petitioner:	Marital Status:	Age of Spouse:
Number of Legal Dependents:	Age of Dependents:	
Applied for Homestead Property Tax Credit (yes or no):	Amount of Homestead Property Tax Credit:	
E-mail Address:		

# GUIDELINES

- Explains documents needed for application processing.
- Displays income levels needed for qualifying.

## BLOOMFIELD TOWNSHIP FINACIAL ASSISTANCE GUIDELINES

Dear Bloomfield Township Resident,

The Township has always strived to serve its residents in the best way possible, and offering financial assistance when needed is one way we can help. If you feel like you qualify for the for the property tax hardship exemption, the waiver of solid waste (refuse) application or the minor home improvement community development block grants please take the time to review the following guideline and apply for the programs for which you would qualify.

Section 211.7u (1) of the Michigan General Property Tax Act defines the Poverty or Hardship Exemption as a method to provide relief for those who, in the judgment of the Board of Review are unable to fully contribute to the annual property tax burden of their principal residence due to their financial situation.

In granting Poverty Exemptions, the Charter Township of Bloomfield and the Board of Review realize that it represents a shift of those property taxes exempted to the other taxpayers of the Township. Poverty Exemptions are intended to assist those who are in temporary financial straits and is NOT intended as a permanent or continuous subsidy.

To be eligible for Hardship Exemption and Waiver of Solid Waste (Refuse) Application, the following information is required to be filed with the Assessing Office:

1. Fully completed and notarized Bloomfield Township Financial Assistance Application
2. Fully completed 2019 W-2 Forms, Social Security Statements or similar income verification for all permanent members of the household
3. Fully completed 2019 Michigan Income Tax Returns for all household members
4. Fully completed 2019 Michigan Homestead Property Tax Credit Claim (MI-1040CR). **IMPORTANT: the law does not allow for the filing of an affidavit attesting that a taxpayer does not file income tax returns. The law requires the applicant to file and produce and income tax even if that return is a zero filing.**
5. Valid Michigan driver's license (if requested)
6. Proof of property ownership (if requested)

Following are the guidelines for Hardship Exemption and Waiver of Solid Waste (Refuse) Application as established by the Charter Township Board of Trustees:

1. Applicants **MUST** meet the poverty income standards; these will be based upon the current year Federal Poverty Thresholds multiplied by a rate of 250% (or 2.5).

<u># Persons</u>	<u>Income</u>
1	\$ 31,225
2	\$ 42,275
3	\$ 53,325
4	\$ 64,750
5	\$ 75,425
6	\$ 86,475
7	\$ 97,525
8	\$108,575
For each additional person	\$ 11,050

2. Applicants **MUST** be an owner of and occupy as a homestead (as defined by MCL 211.7c) the property for which an exemption is being requested. Vacant,

# GUIDELINES PAGE 2

- Proposed increased True Cash Value (TCV) for limit from \$350,000 to \$425,000
- Proposed increased checking and saving account limits per person in the household from \$20,000 to \$22,500

unplatted, contiguous land shall not qualify as homestead property for purposes of these guidelines.

3. Applicants MUST file a completed "Poverty Exemption Application" with the Board of Review on a form provided by the Assessing Department and included a copy of their Michigan Homestead Property Tax Credit Claim and State of Michigan Income Tax Returns and all supporting documents for ALL PERSONS residing in the homestead.
4. Applicants must provide a valid driver's license or other form of identification and must also provide a copy of a deed, land contract, or other evidence of ownership of the property for which an exemption is requested by the Assessor or Board of Review.
5. Applicants should have a true cash value (assessment x 2), which is less than four hundred and twenty five thousand (\$425,000) dollars.
6. The amount of money the applicant has in checking and savings accounts, with the total not to exceed \$22,500 per person residing in the homestead.
7. Ownership interest in real estate other than the homestead. Applicants shall not have ownership of, or interest in, real estate other than the qualified homestead.

Under no circumstance shall the Board of Review reduce the taxable value lower than that which would produce an annual ad valorem tax equal to 3.5% of an applicant's income plus any property tax credit refund payable by the State of Michigan. There shall be no poverty exemption granted that would reduce an applicant's taxable value to less than 1,000. It is not the intent of the Township to adopt a policy of an individual being "automatically entitled" to exemption.

Your application will be sent to the March, July or December Board of Review session. The Board of Review schedule for 2019 is as follows:

March:	Monday, March 9, 2020	or
July:	Tuesday, July 21, 2020	or
December:	Tuesday, December 15, 2020	

Applicants will be notified in writing of the Board of Review's decision and their appeal rights. All hardship exemptions are, by law, effective for *one year only*.

Please return the fully completed application and necessary information to the Bloomfield Township Assessing Department 5 days prior to the Board of Review. The application can be signed and notarized at the Township. **If there are any questions, please call the Assessing Department at (248) 433-7710.**

Darrin Kraatz, MMAO  
Assessor



BLOOMFIELD TOWNSHIP FINANCIAL ASSISTANCE APPLICATION

Please check all of the following that apply:

- Property Tax Hardship/Poverty Exemption
Waiver of Solid Waste (Refuse) Application
Minor Home Repair Community Development Block Grants

I, Petitioner, being the owner and residing at the property that is listed below as my principal residence, apply for property tax relief under MCL 211.7a of the General Property Tax Act, Public Act 206 of 1893.

In order to be considered complete, this application must: 1) be completed in its entirety, 2) include information regarding all members residing within the household, and 3) include all required documentation as listed within the application.

PERSONAL INFORMATION: Petitioner must list all required personal information.

Form with fields for Property Address of Principal Residence, Daytime Phone Number, Age of Petitioner, Marital Status, Age of Spouse, Number of Legal Dependents, Age of Dependents, Applied for Homestead Property Tax Credit, Amount of Homestead Property Tax Credit, and Email Address.

REAL ESTATE INFORMATION: List the real estate information related to your principal residence. Be prepared to provide a deed, land contract or other evidence of ownership of the property at the Board of Review meeting.

Table with columns: Property Parcel Code Number, Name of Mortgage Company, Unpaid Balance Owed on Principal Residence, Monthly Payment, Length of Time at This Residence.

ADDITIONAL PROPERTY INFORMATION: List information related to any other property you, or any household member owns.

Table with columns: Property Address, Name of Owner(s), Assessed Value, Amount & Date of Last Taxes Paid.

EMPLOYMENT INFORMATION: List your current employment information.

Form with fields for Name of Employer, Name of Contact Person, Address of Employer, Employer Phone Number.

List all income sources, including but not limited to: salaries, Social Security, rents, pensions, IRA's (individual retirement accounts), unemployment compensation, disability, government pensions, worker's compensation, dividends, claims and judgments from lawsuits, alimony, child support, friend or family contribution, reverse mortgage, or any other source of income.

Table with columns: Source of Income, Monthly or Annual Income (indicate which).

CHECKING, SAVINGS AND INVESTMENT INFORMATION: List any and all savings owned by all household members, including but not limited to: checking accounts, savings accounts, postal savings, credit union shares, certificates of deposit, cash, stocks, bonds, or similar investments.

Table with columns: Name of Financial Institution or Investments, Amount on Deposit, Current Interest Rate, Name on Account, Value of Investment.

LIFE INSURANCE: List all policies held by all household members.

Table with columns: Name of Insured, Amount of Policy, Monthly Payment, Policy Paid in Full, Name of Beneficiary, Relationship to Insured.

MOTOR VEHICLE INFORMATION: All motor vehicles (including motorcycles, motor homes, camper trailers, boats, etc.) held or owned by any person residing within the household must be listed.

Table with columns: Make, Year, Monthly Payment, Balance Owed.

LIST ALL PERSONS LIVING IN HOUSEHOLD: All persons residing in the residence must be listed.

Table with columns: First & Last Name, Age, Relationship to Applicant, Place of Employment, Amount of Monetary Contribution to Family Income.

PERSONAL DEBT: All personal debt for all household members must be listed.

Table with columns: Creditor, Purpose of Debt, Date of Debt, Original Balance, Monthly Payment, Balance Owed.

MONTHLY EXPENSE INFORMATION: The amount of monthly expenses related to the principal residence for each category must be listed. Indicate N/A as necessary.

Table with columns: Housing (Electric, Water), Phone (Cable, Food), Clothing (Health Insurance, Garbage), Daycare (Car Expense, etc.), Other (list type).

Notice: Any willful misstatements or misrepresentations made on this form may constitute perjury, which, under the law, is a felony punishable by fine or imprisonment.

Notice: Per MCL 211.7a(2b), a copy of all household members FEDERAL INCOME TAX RETURNS, STATE INCOME TAX RETURNS (MI-1040) and HOMESTEAD PROPERTY TAX CREDIT CLAIMS (MI-1040CR 1, 2, 3 or 4) must be attached as proof of income.

Petitioner: Do not sign this application until witnessed by the Board of Review Secretary or Notary Public.

STATE OF MICHIGAN
COUNTY OF

I, the undersigned Petitioner, hereby declare that the foregoing information is complete and true and that neither I, nor any household member residing within the principal residence, have money, income or property other than mentioned herein.

Petitioner Signature Date

Subscribed and sworn this day of, 2020

Notary Signature Printed Name

My Commission Expires

This application shall be filed after January 1, but before the day prior to the last day of March, July or December Board of Review to the address below.

Board of Review
Charter Township of Bloomfield
Assessor's Office
4200 Telegraph Road
P.O. Box 485
Bloomfield Hills, MI 48302

DECISIONS OF THE MARCH BOARD OF REVIEW MAY BE APPEALED IN WRITING TO THE MICHIGAN TAX TRIBUNAL BY JULY 31 OF THE CURRENT YEAR. JULY OR DECEMBER BOARD OF REVIEW DENIALS MAY BE APPEALED TO MICHIGAN TAX TRIBUNAL WITHIN 30 DAYS OF THE DENIAL. A COPY OF THE BOARD OF REVIEW DECISION MUST BE INCLUDED WITH THE FILING.

Michigan Tax Tribunal
PO Box 30232
Lansing, MI 48909
Phone: 517-436-7550
Fax: 517-436-7580
E-mail: mttrb@mtt.leg.state.mi.us

HARDSHIP EXEMPTION
WAIVER OF SOLID WASTE APPLICATION
MINOR HOME REPAIR COMMUNITY DEVELOPMENT BLOCK GRANTS



# DEFERMENT OF SUMMER TAXES APPLICATION

## Application for Deferment of Summer Taxes

Issued under the authority of Public Act 206 of 1893; MCL 211.51

**INSTRUCTIONS:** File this application with the treasurer of your city, village, or township. You may file your intent to defer before September 15, or before the date your summer taxes are due, whichever is later. **Do NOT file this application with the Michigan Department of Treasury.**

**NOTE:** Though filing this form is voluntary, your tax due date will not be extended unless this form is filed. The local treasurer may require additional documentation to verify your claim.

PART 1: APPLICANT INFORMATION		
Last Name	First Name	M.I.
Telephone Number	Property Identification Number	
Address of Principal Residence (street number and name, city, state, ZIP code)	Name of City, Township, or Village (taxing authority)	
	Bloomfield <input type="checkbox"/> City <input checked="" type="checkbox"/> Township <input type="checkbox"/> Village	
PART 2: DEFERMENT INFORMATION		
<p>I hereby request that the Treasurer of the above-noted municipality defer the due date of the summer taxes on the property identified above, without penalty or interest charges, until February 15 (payment must be received on or before February 14 to avoid penalty and interest) based on the following qualification:</p> <p>(Check 1 or 2 below to identify your basis for this application. Select one choice only.)</p> <p><input type="checkbox"/> 1. <b>Principal Residence:</b>            I certify that my gross household income for the preceding calendar year did not exceed \$40,000 and that I qualify for the deferment provided for in the General Property Tax Act under the classification marked below.</p> <p><input type="checkbox"/> 62 years of age or older, including the unmarried surviving spouse of a person who was 62 years of age or older at the time of death</p> <p><input type="checkbox"/> Paraplegic, Hemiplegic, or Quadriplegic</p> <p><input type="checkbox"/> Eligible Serviceperson, Eligible Veteran, Eligible Widow or Widower</p> <p><input type="checkbox"/> Blind Person</p> <p><input type="checkbox"/> Totally and Permanently Disabled</p> <p><input type="checkbox"/> 2. <b>Agricultural Real Property:</b>            I certify that I own the above property, which is classified or used as agricultural real property, and that the gross receipts of agricultural or horticultural operations in the previous year (or the average gross receipts for such operations in the previous three years) are not less than my household income for the preceding calendar year or the combined household incomes in the previous year of the individual members of a limited liability company or partners of a partnership that owns the agricultural real property.</p>		
PART 3: CERTIFICATION		
<p><i>I understand that if this deferment is approved, the deferred taxes must be paid on or before February 14 in order to avoid penalty and interest. I also understand that misleading or false statements on this application may subject me to penalties and interest for late payments of taxes.</i></p>		
Applicant's Signature	Date	
FOR CITY, VILLAGE, OR TOWNSHIP USE ONLY		
Deferment Approval Signature	Date	



## State Tax Commission Affidavit for Disabled Veterans Exemption

Issued under authority of Public Act 161 of 2013, MCL 211.7b. Filing is mandatory.

**Instructions:** This form is to be used to apply for an exemption of property taxes under MCL 211.7b, for real property used and owned as a homestead by a disabled veteran who was discharged from the armed forces of the United States under honorable conditions or his or her unmarried surviving spouse. The property owner, or his or her legal designee, must annually file the Affidavit with the supervisor or assessing officer any time after December 31 and before, or until the conclusion of, the December Board of Review.

# AFFIDAVIT FOR DISABLED VETERANS EXEMPTION

<b>OWNER INFORMATION</b> (Enter information for the disabled veteran or unmarried surviving spouse)		
Owner's Name	Owner's Telephone Number	
Owner's Mailing Address		
City	State	ZIP Code
<b>LEGAL DESIGNEE INFORMATION</b> (Complete if applicable)		
Legal Designee Name		Daytime Telephone Number
Mailing Address		
City	State	ZIP Code
<b>HOMESTEAD PROPERTY INFORMATION</b> (Enter information for the property in which the exemption is being claimed)		
City, Township or Village (Check the appropriate box and provide the name) <input type="checkbox"/> City <input type="checkbox"/> Township <input type="checkbox"/> Village		
County	Name of the Local School District	
Parcel Identification Number	Date the Property was Acquired (MM/DD/YYYY)	
Homestead Property Address		
City	State	ZIP Code
<b>ACKNOWLEDGEMENT</b> (Check all boxes that apply)		
<input type="checkbox"/> I am a disabled veteran, or the legal designee of the disabled veteran, who was discharged under honorable conditions from the armed forces of the United States of America with a service connected disability.		
<input type="checkbox"/> I am the unmarried surviving spouse, or the legal designee of the unmarried surviving spouse, of a disabled veteran who was discharged under honorable conditions from the armed forces of the United States of America with a service connected disability.		
<input type="checkbox"/> I am a Michigan resident.		
<input type="checkbox"/> I own the property in which the exemption is being claimed and it is used as my homestead. Homestead is generally defined as any dwelling with its land and buildings where a family makes its home.		
<b>AFFIRMATION OF ELIGIBILITY</b> (Check the appropriate box and provide a copy of the required documentation)		
<input type="checkbox"/> The disabled veteran has been determined by the United States Department of Veterans Affairs to be permanently and totally disabled as a result of military service and entitled to veterans' benefits at the 100% rate (must attach a copy of the letter from the U.S. Department of Veterans Affairs).		
<input type="checkbox"/> The disabled veteran is receiving or has received pecuniary assistance due to disability for specially adapted housing (must attach a copy of the certificate from the U.S. Department of Veterans Affairs).		
<input type="checkbox"/> The veteran has been rated by the United States Department of Veterans Affairs as individually unemployable (must attach a copy of the letter from the U.S. Department of Veterans Affairs).		
<b>CERTIFICATION</b>		
<i>I hereby certify to the best of my knowledge that the information provided in this Affidavit is true and I am eligible to receive the disabled veteran's exemption from property taxes pursuant to Michigan Compiled Law, Section 211.7b.</i>		
Printed Name of Owner or Legal Designee		Title of Signatory
Signature of Owner or Legal Designee		Date

DESIGNEE MUST ATTACH LETTER OF AUTHORITY

# HOW TO APPLY?

- **Property Tax Hardship/Poverty Exemption**
  - Hardship application and guidelines form is available on the Township's Website under the Assessor's page.
  - The Assessing Department has the forms available for the public in office.
  - Contact the Assessing Department at 248-433-7710 or [assessor@bloomfieldtwp.org](mailto:assessor@bloomfieldtwp.org) with any hardship questions.
- **Waiver of Solid Waste (Refuse)**
  - Application is available on the Assessor's Page on the Township's Website.
  - The Assessing Department has the forms available for the public in office.
  - Contact the Assessing Department at 248-433-7710 or [assessor@bloomfieldtwp.org](mailto:assessor@bloomfieldtwp.org) with any hardship questions.
- **Minor Home Repair Community Development Block Grants (CDBG funds)**
  - CDBG information is available on the Senior Services page on the Township's Website.
  - Contact Senior Services at 248-723-3500.
  - Application is on the Assessor's Page of the Township's Website.
- **Application for Deferment of Summer Taxes**
  - Application is available on the Treasurer's Page on the Township's Website.
- **Affidavit for Disabled Veterans Exemption**
  - Application is available on the Assessor's Page on the Township's Website and in the office.
  - Contact the Assessing Department at 248-433-7710 or [assessor@bloomfieldtwp.org](mailto:assessor@bloomfieldtwp.org).

## QUESTIONS AND ASSISTANCE

- Any questions regarding the Bloomfield Township Financial Assistance programs can be answered by the Assessing Department.
  - [assessor@bloomfieldtwp.org](mailto:assessor@bloomfieldtwp.org)
  - 248-433-7710
- We are here to help the Township's residents who need financial assistance.